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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identity Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for nple, your driver's use or passport). g your picture tification to your ting with the trustee.	Michael First name K Middle name Gay Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-5787	

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Case number (if known)

Debtor 1 Michael K Gay

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Business name(s) Include trade names and Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 1963 CharmingFare St Columbus, OH 43228 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Franklin County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Document Page 3 of 54 Case number (if known) Debtor 1 Michael K Gay Part 2: Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details 8. How you will pay the fee about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with

		the	Application to Have th	e Chapter 7 Filing Fee Wai	ved (Official Form 103B)	and file it with your petition	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
			District	When	C	ase number	
			District	When	C	ase number	
			District	When	C	ase number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business	☐ Yes.					

Relationship to you Debtor When District Case number, if known Debtor Relationship to you When District Case number, if known

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may,

but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out

11. Do you rent your residence?

partner, or by an affiliate?

> Go to line 12. No.

a pre-printed address.

The Filing Fee in Installments (Official Form 103A).

Has your landlord obtained an eviction judgment against you? ☐ Yes.

> No. Go to line 12.

> > Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Document Page 4 of 54 Case number (if known) Debtor 1 Michael K Gay Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11

U.S.C. § 101(51D).

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No.

☐ Yes.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Michael K Gay

Debtor 1 Michael K Gay

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Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Michael K Gay		Document	Paye 6 01 54	Case number (if kno	own)
Answer These Questi	ons for Repo	rting Purposes			
at kind of debts do ı have?	16a. A r	e your debts primarily consume			11 U.S.C. § 101(8) as "incurred by an
		No. Go to line 16b.			
	•	Yes. Go to line 17.			
		No. Go to line 16c.			
		Yes. Go to line 17.			
	16c. Sta	ate the type of debts you owe that	are not consumer deb	ts or business deb	ts
you filing under apter 7?	□ No. Ia	m not filing under Chapter 7. Go to	o line 18.		
you estimate that er any exempt perty is excluded and					excluded and administrative expenses
ninistrative expenses	•	No			
available for tribution to unsecured ditors?		Yes			
w many Creditors do I estimate that you e?	■ 1-49 □ 50-99 □ 100-199	I	□ 5001-10,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
w much do you imate your assets to worth?	□ \$50,001 - ■ \$100,001	\$100,000 - \$500,000	□ \$10,000,001 - \$50 □ \$50,000,001 - \$100	million million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
w much do you imate your liabilities pe?	□ \$50,001 ■ \$100,001	- \$100,000 - \$500,000	□ \$10,000,001 - \$50 □ \$50,000,001 - \$100	million million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Sign Below					
	If I have chose United States If no attorney document, I I request reliable I understand bankruptcy cand 3571. /s/ Michael K Signature of	sen to file under Chapter 7, I am as Code. I understand the relief avairable represents me and I did not pay thave obtained and read the notice of in accordance with the chapter making a false statement, concease can result in fines up to \$250, K Gay Gay Debtor 1	ware that I may proceduilable under each chain or agree to pay some or required by 11 U.S.C of title 11, United State aling property, or obtain 000, or imprisonment	ed, if eligible, under pter, and I choose one who is not an a § 342(b). es Code, specified in ning money or prop for up to 20 years,	r Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7. ttorney to help me fill out this in this petition. perty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,
	Answer These Question at kind of debts do a have? E you filing under apter 7? you estimate that er any exempt exempt excluded and ministrative expenses paid that funds will available for tribution to unsecured ditors? W many Creditors do a estimate that you e? W much do you imate your assets to worth? W much do you imate your liabilities pe?	Answer These Questions for Report I for I have? Answer These Questions for Report I for I have?	Answer These Questions for Reporting Purposes at kind of debts do I have? 16a.	Answer These Questions for Reporting Purposes at kind of debts do I faa. Are your debts primarily consumer debts? Consumer of individual primarily for a personal, family, or household pure individual primarily for a personal, family, or household pure individual primarily for a personal, family, or household pure individual primarily business debts? Business debts on the primarily business debts? Business debts on the operation of the primarily business debts? Business debts on the operation of the primarily business debts? Business debts on the operation of the primarily business debts? Business debts on the operation of the	at kind of debts do I faa. Are your debts primarily consumer debts? Consumer debts are defined in individual primarily for a personal, family, or household purpose." No. Go to line 16b.

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Debtor 1 Michael K Gay Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brooke Elnora Elliott	Date	December 3, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Brooke Elnora Elliott Printed name		
JP Amourgis & Associates - Columbus		
4449 Easton Way Suite 200		
Columbus, OH 43219		
Number, Street, City, State & ZIP Code		
Contact phone 614-934-2000	Email address	bk_columbus@amourgis.com
0094035 OH		
Par number 9 State		

		Doddin		_	
Fill in this infor	mation to identify your	case:			
Debtor 1	Michael K Gay				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	176,900.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	48,726.74
	1c. Copy line 63, Total of all property on Schedule A/B	\$	225,626.74
Paı	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	87,156.63
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	41,640.00
	Your total liabilities	\$	128,796.63
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,731.69
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,726.70
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Case number (if known) Document

Debtor 1 Michael K Gay

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

3,609.84 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

				ument	Page 10 of 54				
Fill in this	information to identif	y your case and th	his filing	g:					
Debtor 1	Michael K	3av							
	First Name		e Name		Last Name				
Debtor 2									
(Spouse, if filin	ng) First Name	Middle	e Name		Last Name				
United Sta	tes Bankruptcy Court fo	or the: SOUTHER	RN DIST	RICT OF OHIO					
Case numb	her							П	Objects to the factor
Jase Hullik									Check if this is a amended filing
									, and the second
> ((: - : - i	L C 400	D							
_	I Form 106A/	_							
Sche	dule A/B: P	roperty							12/15
each cate	gory, separately list and	describe items. List	an asset	only once. If an	asset fits in more than or	ne category, lis	t the asset in	the c	ategory where you
ink it fits b	est. Be as complete and	d accurate as possib	le. If two	married people	are filing together, both a	e equally resp	onsible for s	upplyi	ng correct
	If more space is needed by question.	, attach a separate s	heet to t	his form. On the	top of any additional page	es, write your r	name and cas	se nun	nber (if known).
	•								
Part 1: De	scribe Each Residence,	Building, Land, or Ot	ther Real	Estate You Owr	or Have an Interest In				
Do you o	wn or have any legal or e	equitable interest in a	any resid	lence, building, l	and, or similar property?				
П N = 0 =	. t- Dt 0				, , ,				
No. Go					, , ,				
_	o to Part 2. Where is the property?				, , , ,				
_					, , , ,				
_					, , , ,				
■ Yes. V			What	t is the property?	^P Check all that apply				
Yes. V			What	t is the property? Single-family ho	Check all that apply	Do not ded	uct secured c	laims c	or exemptions. Put
Yes. V	Vhere is the property?	escription	. ■		P Check all that apply ome	the amount	of any secure	ed clair	ms on Schedule D:
Yes. V	Where is the property? Charmingfare St	escription	. ■	Single-family ho	P Check all that apply ome unit building	the amount	of any secure	ed clair	
Yes. V	Where is the property? Charmingfare St	escription	. ■	Single-family ho Duplex or multi- Condominium o	P Check all that apply ome unit building or cooperative	the amount	of any secure	ed clair	ms on Schedule D:
Yes. V 1.1 1963 Street a	Where is the property? Charmingfare St address, if available, or other decorated the state of t	·	. ■	Single-family ho Duplex or multi- Condominium o	P Check all that apply ome unit building or cooperative	the amount	t of any secure Who Have Clai	ed clair ims Se	ms on Schedule D:
Yes. V 1.1 1963 Street a	Where is the property? Charmingfare St	escription 43228-0000	. =	Single-family ho Duplex or multi- Condominium of Manufactured of	P Check all that apply ome unit building or cooperative	Current va	t of any secure Who Have Clai Ulue of the Derty?	ed clair ims Se Cu	ms on Schedule D: ecured by Property. rrent value of the rtion you own?
Yes. V 1.1 1963 Street a	Where is the property? Charmingfare St address, if available, or other decorated the state of t	·		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop	Check all that apply ome cunit building or cooperative or mobile home	Current va	t of any secure Who Have Clai	ed clair ims Se Cu	ms on Schedule D: ecured by Property. rrent value of the rtion you own?
1963 Street a	Where is the property? Charmingfare St address, if available, or other d	43228-0000		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare	Check all that apply ome cunit building or cooperative or mobile home	Current va	t of any secure Who Have Clai Under the operty?	ed clair ims Se Cu por	ms on Schedule D: scured by Property. rrent value of the rtion you own? \$176,900.0
1963 Street a	Where is the property? Charmingfare St address, if available, or other d	43228-0000		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other	P Check all that apply ome	Current va entire prop	t of any secure Who Have Clai Ulue of the Derty? 76,900.00 The nature of yee simple, ter	ed clair ims Se Cu por	ms on Schedule D: curred by Property. rrent value of the rtion you own? \$176,900.0 whership interest
1963 Street a	Where is the property? Charmingfare St address, if available, or other d	43228-0000		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other has an interest if	Check all that apply ome cunit building or cooperative or mobile home	Current va entire prop \$17 Describe t (such as for	t of any secure Who Have Clai Ilue of the Derty? 76,900.00 the nature of the ee simple, ter ee), if known.	ed clair ims Se Cu por	ms on Schedule D: curred by Property. rrent value of the rtion you own? \$176,900.0 whership interest
Yes. V .1 1963 Street a	Charmingfare St address, if available, or other demonstrates OH	43228-0000		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other has an interest if Debtor 1 only	P Check all that apply ome	Current va entire prop	t of any secure Who Have Clai Ilue of the Derty? 76,900.00 the nature of the ee simple, ter ee), if known.	ed clair ims Se Cu por	ms on Schedule D: ecured by Property.
Yes. V 1.1 1963 Street a Colu City	Charmingfare St address, if available, or other dominates of the state	43228-0000		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other has an interest if Debtor 1 only Debtor 2 only	Check all that apply ome funit building or cooperative or mobile home perty	Current va entire prop \$17 Describe t (such as for	t of any secure Who Have Clai Ilue of the Derty? 76,900.00 the nature of the ee simple, ter ee), if known.	ed clair ims Se Cu por	ms on Schedule D: coured by Property. rrent value of the rtion you own? \$176,900.0 ownership interest
Yes. V 1.1 1963 Street a	Charmingfare St address, if available, or other dominates of the state	43228-0000		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other has an interest if Debtor 1 only Debtor 2 only	P Check all that apply ome unit building or cooperative or mobile home perty	Current va entire prop \$17 Describe t (such as fr a life estat Fee Sim	t of any secure Who Have Clai Ilue of the Derty? 76,900.00 The nature of the simple, ter The simple, ter The simple, ter The simple is the sim	Cu poi	ms on Schedule D: ecured by Property. rrent value of the rtion you own? \$176,900.0 ownership interest by the entireties, of
Yes. V 1.1 1963 Street a Colu City	Charmingfare St address, if available, or other dominates of the state	43228-0000		Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other has an interest if Debtor 1 only Debtor 2 only At least one of the	P Check all that apply ome unit building or cooperative or mobile home perty In the property? Check one ebtor 2 only the debtors and another	Current va entire prop \$17 Describe t (such as fra a life estat Fee Sim	t of any secure Who Have Clai Illue of the Derty? 76,900.00 The nature of the simple, ter The	Cu poi	ms on Schedule D: ecured by Property. rrent value of the rtion you own? \$176,900.0 ownership interest by the entireties, of
Yes. V 1.1 1963 Street a	Charmingfare St address, if available, or other dominates of the state	43228-0000	Who	Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other has an interest if Debtor 1 only Debtor 2 only At least one of the	P Check all that apply ome unit building or cooperative or mobile home perty The property? Check one ebtor 2 only the debtors and another unwish to add about this it	Current va entire prop \$17 Describe t (such as fra a life estat Fee Sim	t of any secure Who Have Clai Ilue of the Derty? 76,900.00 The nature of the simple, ter The	Cu poi	ms on Schedule D: ecured by Property. rrent value of the rtion you own? \$176,900.0 ownership interest by the entireties, of
Yes. V 1.1 1963 Street a Colu City	Charmingfare St address, if available, or other dominates of the state	43228-0000	Who	Single-family ho Duplex or multi- Condominium of Manufactured of Land Investment prop Timeshare Other has an interest if Debtor 1 only Debtor 2 only Debtor 1 and Do At least one of the r information you erty identification	P Check all that apply ome unit building or cooperative or mobile home perty The property? Check one ebtor 2 only the debtors and another unwish to add about this it	Current va entire prop \$17 Describe t (such as for a life estate Fee Sim Check (see inseem, such as locations)	t of any secure Who Have Clai Ilue of the Derty? 76,900.00 The nature of the simple, ter The	Cu poi	ms on Schedule D: ecured by Property. rrent value of the rtion you own? \$176,900.0 ownership interest by the entireties, of

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$176,900.00

De	btor 1 N	/lichael K Gay		Document	Page 11 of 54 Case	number (if known)	
3. C	Cars, vans	, trucks, tractors, sp	ort utility vel	nicles, motorcycles		-	
] No						
	Yes						
3.	1 Make:	Chevrolet		Who has an interest in th	e property? Check one	the amount of any s	red claims or exemptions. Put ecured claims on <i>Schedule D:</i>
	Model:	Sonic		Debtor 1 only		Creditors Who Have	e Claims Secured by Property.
	Year:	2016 mate mileage:	46000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2	only	Current value of the entire property?	e Current value of the portion you own?
		formation:	40000	☐ At least one of the debt		ontino proporty:	portion you own.
	Vehicl	e is in good condi	ition			\$0.404	00 00 101 00
				Check if this is comm (see instructions)	unity property	\$9,481.	9,481.00
5					rom Part 2, including any e		\$9,481.00
-	pages you	i have attached for P	art 2. Write t	hat number here		=>	Ψ3,401.00
Par	t 3: Descr	ibe Your Personal and	Household Ite	ems			
Do	you own	or have any legal or	equitable int	erest in any of the follow	ving items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
I		goods and furnishi Major appliances, fur escribe		china, kitchenware			·
			sehold good than \$500.		shings. No one item wo	orth	\$3,000.00
I	Electronics Examples: ☐ No ■ Yes. De	Televisions and radio including cell phones			oment; computers, printers,	scanners; music co	llections; electronic devices
		Telev \$500	ision and N	Misc Electronics. No c	ne item is worth more	than	\$600.00
	_				oks, pictures, or other art ob	ojects; stamp, coin, c	or baseball card collections;
	■ No □ Yes. De	escribe					
ı	Examples: ■ No	musical instruments		d other hobby equipment;	bicycles, pool tables, golf cl	ubs, skis; canoes ar	nd kayaks; carpentry tools;
I	☐ Yes. De	escribe					

	Case 2:18-bk-5761	.8 Doc 1		Entered 12/03/18 1 age 12 of 54	.4:57:07	Desc Main
Debtor 1	Michael K Gay		Document Fa	Case number	(if known)	
10. Firea Exa ■ No	mples: Pistols, rifles, shotguns	s, ammunition, ar	nd related equipment			
☐ Ye	s. Describe					
□ No	mples: Everyday clothes, furs	, leather coats, d	esigner wear, shoes, acc	essories		
	Wearin	g Apperal				\$300.00
□ No	mples: Everyday jewelry, cost	ume jewelry, eng	gagement rings, wedding	rings, heirloom jewelry, watche	s, gems, gold	, silver
	Misc Je	ewelry				\$25.00
Exa No Ye 14. Any No Ye 15. Add	s. Describe other personal and househouse. s. Give specific information	old items you di our entries from	Part 3, including any e	ding any health aids you did i		\$3,925.00
Part 4:	Describe Your Financial Assets					
Do you	own or have any legal or eq	uitable interest	in any of the following?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	mples: Money you have in you	•		ox, and on hand when you file	your petition	
				Cash		\$25.00
Exa □ No	institutions. If you have		counts; certificates of de nts with the same institution Institution name	•	rokerage hous	ses, and other similar
	17.1.	Checking	Chase Bank			\$31.94
<i>Exa</i> ■ No				narket accounts		

Official Form 106A/B Schedule A/B: Property page 3

Case 2:18-bk-57618 Doc 1 Filed 12/03/18 Entered 12/03/18 14:57:07 Desc Main Document Page 13 of 54 Case number (if known) Debtor 1 Michael K Gay 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC partnership, and

19	joint venture	i stock and interests in inco	rporated and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No			
	☐ Yes. Give specific	information about them		
	•	Name of entity:	% of ownership:	
20	Negotiable instrume Non-negotiable instr ■ No	nts include personal checks, o	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
21	. Retirement or pensing Examples: Interests), 403(b), thrift savings accounts, or other pension or profit-sharing pla	ns
	Yes. List each acco	ount separately.		
		Type of account:	Institution name:	
		IRA	J.P. Morgan Chase Bank	\$8,568.47
		401K	Pinnacle Hotels USA	\$18,033.28
			so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications companies Institution name or individual:	s, or others
23	Annuities (A contrac	ct for a periodic payment of mo	oney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24		ation IRA, in an account in a 1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition progra	am.
	☐ Yes	Institution name and descript	tion. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	No		(other than anything listed in line 1), and rights or powers exerci	sable for your benefit
	☐ Yes. Give specific	information about them		
26	Examples: Internet of No		and other intellectual property seeds from royalties and licensing agreements	
27	Examples: Building	es, and other general intangi permits, exclusive licenses, co information about them	bles poperative association holdings, liquor licenses, professional licenses	
M	loney or property owe	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28	Tax refunds owed to No	o you		
		information about them, include	ding whether you already filed the returns and the tax years	

Debtor	Case 2:18-bk-5 Michael K Gay	57618 Doc 1		B Entered 12/03/18 14:57:0 Page 14 of 54 Case number (if known)	7 Desc Main
Ex ■ N			ll support, child support	, maintenance, divorce settlement, property	settlement
Ex	benefits; unpaid	disability insurance pay loans you made to sor		ts, sick pay, vacation pay, workers' compe	nsation, Social Security
			Ith savings account (HS	SA); credit, homeowner's, or renter's insural	nce
■ Y	es. Name the insurance	company of each polic Company name:	y and list its value.	Beneficiary:	Surrender or refund value:
		Group term life in Employer	surance through	Sister	\$0.0
		Sun Life. Whole L	ife Policy.	Estate	\$8,662.0
33. Cla Ex N	es. Give specific informations against third partie amples: Accidents, emple to es. Describe each claim ther contingent and unlied to es. Describe each claim the financial assets you describe the contingent and unlied to es. Describe each claim the financial assets you describe the contingent and unlied the contingent and unlied the contingent and unlied the continue that the continue th	es, whether or not you by ment disputes, insur- guidated claims of even	ance claims, or rights to	or made a demand for payment o sue counterclaims of the debtor and rights to	o set off claims
36. A	dd the dollar value of al	l of your entries from		entries for pages you have attached	\$35,320.74
Part 5:	Describe Any Business-R	elated Property You Ow	n or Have an Interest In.	List any real estate in Part 1.	
37. Do y	ou own or have any legal of . Go to Part 6.				
Part 6:	Describe Any Farm- and O			or Have an Interest In.	
_	you own or have any le	gal or equitable inter	est in any farm- or co	mmercial fishing-related property?	

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Go to line 47.

Page 15 of 54 Document Case number (if known) Debtor 1 Michael K Gay Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership $\hfill \square$ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$176,900.00 Part 2: Total vehicles, line 5 \$9.481.00 57. Part 3: Total personal and household items, line 15 \$3,925.00 58. Part 4: Total financial assets, line 36 \$35,320.74 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$48,726.74 Copy personal property total \$48,726.74

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$225,626.74

Official Form 106A/B Schedule A/B: Property page 6

		D O O O O I I I O	H	
Fill in this infor	mation to identify your	case:		
Debtor 1	Michael K Gay			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT OF OHIO		
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	Check o	ne only, even i	f your spouse is	filing with you.
----	--	---------	-----------------	------------------	------------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim the exemption you cl			Specific laws that allow exemption	
1963 Charmingfare St Columbus, OH 43228 Franklin County	\$176,900.00		\$136,925.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Value based on Franklin County Auditor Line from Schedule A/B: 1.1	[100% of fair market value, up to any applicable statutory limit	2023.00(A)(1)	
2016 Chevrolet Sonic 46000 miles Vehicle is in good condition	\$9,481.00		\$3,775.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(2)	
Household goods, furniture and furnishings. No one item worth more	\$3,000.00		\$3,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
than \$500. Line from Schedule A/B: 6.1		☐ 100% of fair market value, u any applicable statutory limit		2020.00(1)(4)(0)	
Television and Misc Electronics. No one item is worth more than \$500	\$600.00		\$150.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(4)(0)	
Wearing Apperal Line from Schedule A/B: 11.1	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Concedito FVD.			100% of fair market value, up to any applicable statutory limit		

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Case number (if known)

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Misc Jewelry Line from Schedule A/B: 12.1	\$25.00		\$25.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
				100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$25.00		\$25.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Zino nom osnodalo 702. Tett			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Bank Line from Schedule A/B: 17.1	\$31.94		\$31.94	Ohio Rev. Code Ann. § 2329.66(A)(3)
				100% of fair market value, up to any applicable statutory limit	
	IRA: J.P. Morgan Chase Bank Line from Schedule A/B: 21.1	\$8,568.47		\$8,568.47	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)
	Ellie Holli ostiloddio 772. 2111			100% of fair market value, up to any applicable statutory limit	2020:00(-1)(-10)(0)
	401K: Pinnacle Hotels USA Line from Schedule A/B: 21.2	\$18,033.28		\$18,033.28	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)
				100% of fair market value, up to any applicable statutory limit	The state of the s
	Group term life insurance through Employer	\$0.00		Unknown	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05
	Beneficiary: Sister Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	(// // //
	Sun Life. Whole Life Policy. Beneficiary: Estate	\$8,662.05	•	\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
	Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	202000(13)(10)
	Sun Life. Whole Life Policy. Beneficiary: Estate	\$8,662.05		\$418.06	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	2020:00(:5)(0)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover	3 years after that for ca	ases fi	,	,
	□ Yes				

	Document Pa	ade 18 of 54		
Fill in this information to identify you	ur case:			
Debtor 1 Michael K Gay				
First Name	Middle Name Last	Name	-	
Debtor 2			_	
(Spouse if, filing) First Name	Middle Name Last	Name		
United States Bankruptcy Court for the	: SOUTHERN DISTRICT OF OHIO			
			-	
Case number (if known)			□ Chook	if this is on
(II KIIOWII)			_	if this is an led filing
			amend	ieu iiiiig
Official Form 106D				
	Who Hove Claims So	cured by Propert		40/45
Schedule D. Creditors	S Who Have Claims See	cured by Propert	<u>y </u>	12/15
	If two married people are filing together, bo			
is needed, copy the Additional Page, fill it number (if known).	out, number the entries, and attach it to this	s form. On the top of any additio	nal pages, write your na	me and case
1. Do any creditors have claims secured b	y your property?			
	this form to the court with your other sche	dulas. Vau hava nathing also t	to roport on this form	
<u> </u>	·	dules. Tou have nothing else i	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor s	Separately Column A	Column B	Column C
for each claim. If more than one creditor has much as possible, list the claims in alphabeti	s a particular claim, list the other creditors in Pa	art 2. As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
much as possible, list the claims in alphabeti	ical order according to the creditor's name.	value of collateral.	claim	If any
2.1 Ally Financial	Describe the property that secures the cl	aim: \$8,895.63	\$9,481.00	\$0.00
Creditor's Name	2016 Chevrolet Sonic 46000 mile	es		
	Vehicle is in good condition			
PO Box 8133	As of the date you file, the claim is: Check	all that		
Cockeysville, MD 21030	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	■ An agreement you made (such as mortga	ago or cocured		
Debtor 2 only	car loan)	age of secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	r's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit	, 6		
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	· · · · · · · · · · · · · · · · · · ·			
Date debt was incurred 07/2018	Last 4 digits of account number			
01/2010				
2.2 Bank Of America	Describe the property that secures the cl	aim: \$78,261.00	\$176,900.00	\$0.00
Creditor's Name	1963 Charmingfare St Columbus		\$170,900.00	φυ.υυ
	OH 43228 Franklin County	'		
	Value based on Franklin County			
Attn: Bankruptcy	Auditor			
Po Box 982238	As of the date you file, the claim is: Check apply.	all that		
El Paso, TX 79998	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	■ An agreement you made (such as mortga	age or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	s's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			

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Debtor 1	Michael K	Gay			Case number (if known)		
	First Name	Middle Name	Last Name				
Date debt	was incurred	Opened 01/05 Last Active 4/16/18	Last 4 digits of account number	7249	49		
Add the	dollar value of	your entries in Columi	n A on this page. Write that number h	nere:	\$87,15	6.63]
	the last page of		ollar value totals from all pages.		\$87,15		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	Page	20 of 5	54			
Fill	in this infor	mation to identify your c	ase:						
Del	btor 1	Michael K Gay							
		First Name	Middle Name	Last Name	е				
	btor 2 buse if, filing)	First Name	Middle Name	Last Name	9				
					5				
Uni	ited States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT OF	ОНЮ					
Cas	se number								
(if kr	nown)						_	eck if this is an	
							am	ended filing	
∩ff	ficial Forr	n 106E/F							
			ho Have Unsecure	d Claim	S			12/15	
			Part 1 for creditors with PRIOF			or creditors with NON	PRIORITY claim		rty to
nam	e and case nu	ntinuation Page to this page mber (if known). .II of Your PRIORITY Uns	e. If you have no information to secured Claims	report in a Pa	ırt, do not f	ile that Part. On the to	op of any additio	nal pages, write yo	our
1.		ors have priority unsecured							
	□ No. Go to I		. o.ao agao. you .						
	Yes.								
2.	List all of you identify what ty possible, list the	rpe of claim it is. If a claim has ne claims in alphabetical orde	. If a creditor has more than one ps both priority and nonpriority amo raccording to the creditor's name ticular claim, list the other creditor	ounts, list that o . If you have m	claim here a	nd show both priority a	nd nonpriority am	ounts. As much as	
	(For an explan	ation of each type of claim, se	ee the instructions for this form in	the instruction	booklet.)				
						Total claim	Priority amount	Nonpriority amount	
2.1	IRS		Last 4 digits of acc	ount number	xxxx	\$0.00			0.00
		reditor's Name							
	P.O. Bo	lized Insolvency Oper ox 7346	ation When was the debt	incurrear			-		
		elphia, PA 19101-7346	•						
		Street City State Zlp Code	As of the date you f	file, the claim	is: Check a	Ill that apply			
	Who incurre	d the debt? Check one.	☐ Contingent						
	Debtor 1	only	☐ Unliquidated						
	Debtor 2	only	☐ Disputed						
	Debtor 1	and Debtor 2 only	Type of PRIORITY (unsecured cla	aim:				
	☐ At least o	ne of the debtors and another	Domestic suppor	t obligations					
	☐ Check if	this claim is for a commun	ity debt Taxes and certain	n other debts y	ou owe the	government			
		subject to offset?	☐ Claims for death	or personal inj	ury while yo	u were intoxicated			
	■ No		Other Specify						

☐ Yes

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Debto	or 1 Michael K Gay		Case number (if known)		
2.2	Ohio Department of Taxation Priority Creditor's Name Bankruptcy Division P.O. Box 530	Last 4 digits of account number XX When was the debt incurred?	xxx \$0	0.00 \$0	0.00 \$0.00
	Columbus, OH 43216 Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply		
,	Who incurred the debt? Check one.	☐ Contingent	oncok ali tilat appiy		
	■ Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	'			
	_	☐ Disputed Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	_			
	☐ Check if this claim is for a community debt	Taxes and certain other debts you	· ·		
	Is the claim subject to offset?	Claims for death or personal injury	while you were intoxicate	:d	
	■ No □ Yes	Other. Specify			
	La res				
Part :	2: List All of Your NONPRIORITY Unsecu	red Claims			
4. Li ui th	No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nesecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2.	alphabetical order of the creditor who laim. For each claim listed, identify what t	holds each claim. If a ype of claim it is. Do not	list claims already inclu	uded in Part 1. If more
	urt 2.				Total claim
4.1	Amex	Last 4 digits of account number	8323		\$3,275.00
	Nonpriority Creditor's Name Correspondence Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 11/97 L 10/29/16	ast Active	40,2 1, 0 100
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divo	rce that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin	01 ,	r debts	
	Yes	Other. Specify Credit Card	<u> </u>		

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Debtor 1 Michael K Gay Case number (if known) 4.2 Last 4 digits of account number 6713 \$2,275.00 Nonpriority Creditor's Name Correspondence Opened 04/96 Last Active Po Box 981540 When was the debt incurred? 10/28/16 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.3 **Amex** Last 4 digits of account number 7653 \$0.00 Nonpriority Creditor's Name Correspondence Opened 05/96 Last Active Po Box 981540 When was the debt incurred? 11/12 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Bank Of America** Last 4 digits of account number 6039 \$22,541.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/03 Last Active Po Box 982238 When was the debt incurred? 7/13/16 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Debto	Michael K Gay		Case number (if known)			
4.5	Bank Of America	Last 4 digits of account number	4291	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 05/13 Last Active 3/29/18			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing				
	☐ Yes	Other. Specify Credit Card				
4.6	Bank Of America	Last 4 digits of account number	8319	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 982238	When was the debt incurred?	Opened 06/06 Last Active 6/18/10			
	EI Paso, TX 79998 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	□Yes	Other. Specify Credit Card	<u> </u>			
4.7	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	6476	\$0.00		
	Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 05/05 Last Active 8/08/07			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Credit Card				
	* *	— Outon Opening				

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Debioi	Wilchael K Gay		Case number (ii known)		
4.8	Capital One	Last 4 digits of account number	3193	\$3,391.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code	When was the debt incurred?	Opened 07/05 Last Active 5/12/18		
	Who incurred the debt? Check one.	As of the date you file, the claim	із: Спеск ан тат арріу		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.9	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	3323	\$0.00	
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 04/96 Last Active 6/02/18		
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	, to or the date year me, and claim	C. C		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	I		
4.1 0	Central Ohio Endoscopy Center	Last 4 digits of account number		\$684.00	
	Nonpriority Creditor's Name ATTN #9654N PO Box 14000	When was the debt incurred?			
	Belfast, ME 04915 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	710 or the date you me, the claim	or check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community				
	debt		ration agreement or divorce that you did not		
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	on plans, and other similar debts		
			אַ אָימויס, מווע טנוופו אווווומו עבטנא		
	Yes	Other Specify Services			

1 Michael K Gay	Document Page 2	Case number (if known)			
Chase Card Services	Last 4 digits of account number	4694	\$3,006.00		
Nonpriority Creditor's Name Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 04/06 Last Active 4/30/18			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim				
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Credit Card	<u> </u>			
Chase Card Services	Last 4 digits of account number	5802	\$2,607.00		
Nonpriority Creditor's Name Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 08/12 Last Active 4/30/18			
Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file the claim	in Charle all that apply			
Who incurred the debt? Check one.	As of the date you file, the claim	s. Спеск ан тат арргу			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	■ Other. Specify Credit Card	<u> </u>			
Chase Card Services	Last 4 digits of account number	8901	\$1,224.00		
Nonpriority Creditor's Name	_		<u> </u>		
Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 01/16 Last Active 7/10/16			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				

■ No

☐ Yes

■ Other. Specify Credit Card

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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1 Michael K Gay		Case number (if known)			
Chase Card Services	Last 4 digits of account number	3965	\$88		
Nonpriority Creditor's Name Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 04/15 Last Active 7/07/16	***		
Wilmington, DE 19850					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	■ Other. Specify Credit Card	<u> </u>			
Chase Card Services	Last 4 digits of account number	3000	\$		
Nonpriority Creditor's Name Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 09/04 Last Active 4/26/09			
Wilmington, DE 19850	when was the debt incurred?	4/20/09			
Number Street City State Zlp Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Credit Card	<u> </u>			
Citibank	Last 4 digits of account number	4484	\$(
Nonpriority Creditor's Name			•		
Centralized Bankruptcy Po Box 790034 St.L. ovic MO 63470	When was the debt incurred?	Opened 6/28/08 Last Active 6/17/10			
St Louis, MO 63179 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	•	•••			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another					
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				

☐ Yes

■ Other. Specify Credit Card

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Case number (if known)

Debtor	1 Michael K Gay		Case number (if known)	
4.1	Citibank North America Nonpriority Creditor's Name	Last 4 digits of account number	2078	\$0.00
	Citibank Corp/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 4/09/12 Last Active 07/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Charge Acc	count	
4.1	Dell Financial Services LLC Nonpriority Creditor's Name	Last 4 digits of account number	3765	\$0.00
	Attn: President/CEO Po Box 81577 Austin, TX 78708	When was the debt incurred?	Opened 09/07 Last Active 2/28/10	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims		
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Charge Acc		
4.1	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	9361	\$1,748.00
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 04/12 Last Active 3/19/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	1	

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Case number (if known)

Debtor	1 Michael K Gay		Case number (if known)				
4.2	Kohls/Capital One	Last 4 digits of account number	5796	\$0.00			
	Nonpriority Creditor's Name Kohls Credit Po Box 3120 Milwaukee, WI 53201 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i	Opened 11/07 Last Active 3/15/16				
	Who incurred the debt? Check one. ■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	tration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.2	Syncb/care Credit Nonpriority Creditor's Name	Last 4 digits of account number	6974	\$0.00			
	PO Box 960061 Orlando, FL 32896	When was the debt incurred?	Opened 08/06 Last Active 8/09/07				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	2 only Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify Charge Acc	count				
4.2	Syncb/clockwrks Royal Nonpriority Creditor's Name	Last 4 digits of account number	4169	\$0.00			
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 4/01/08 Last Active 4/12/09				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes ☐ Other, Specify Charge Account						

Debtor	1 Michael	K Gay	Document Page 2	29 of 5 Case no	4 umber (if known)		
4.2	Target		Last 4 digits of account number	4664		\$0.00	
Nonpriority Creditor's Name Attn: Payment Disputes Mailstop 2201, PO Box 26907 Tempe, AZ 85285		nent Disputes 201, PO Box 26907	When was the debt incurred?	Oper 5/25/	ned 8/04/07 Last Active 09		
Number Street City State Zlp Code Who incurred the debt? Check one.			As of the date you file, the claim	is: Check	all that apply		
	Debtor 1 o		☐ Contingent				
	Debtor 2 o	•	☐ Unliquidated				
	_	nd Debtor 2 only	☐ Disputed				
	_	e of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
		his claim is for a community	☐ Student loans				
	debt			aration ag	reement or divorce that you did not		
	No	ubject to offset?	report as priority claims Debts to pension or profit-shari	ng plans,	and other similar debts		
	☐ Yes		Other. Specify Credit Car				
			— Other opedity			_	
Part 3:	List Othe	rs to Be Notified About a D	ebt That You Already Listed				
is tryir have r	ng to collect fr more than one	om you for a debt you owe to	d about your bankruptcy, for a debt that someone else, list the original creditor i hat you listed in Parts 1 or 2, list the add t or submit this page.	n Parts 1	or 2, then list the collection agend	y here. Similarly, if you	
	nd Address lin County l	Municipal Court	On which entry in Part 1 or Part 2 did yo Line 4.19 of (<i>Check one</i>):	_	•	-1	
	of Court 3rd				Creditors with Priority Unsecured Cla Creditors with Nonpriority Unsecured		
	outh High S		•	■ Paπ 2:	Creditors with Nonpriority Unsecured	Claims	
Colum	nbus, OH 43	3215	Last 4 digits of account number				
	nd Address & McDanie	I PI C	On which entry in Part 1 or Part 2 did yo Line 4.4 of (<i>Check one</i>):		riginal creditor? Creditors with Priority Unsecured Cla	aima	
-	า Urban, ES			_	Creditors with Nonpriority Unsecured		
	x 23200		•	- Fait 2.	Creditors with Nonpholity Orisecured	Ciairis	
Louis	ville, KY 40	223-0200	Last 4 digits of account number				
Name ar	nd Address		On which entry in Part 1 or Part 2 did yo	u list the o	riginal creditor?		
	Attorney Ge		ine 2.2 of (Check one):				
150 E.	Gay Street	t Bankruptcy Unit , 21st Floor		☐ Part 2: Creditors with Nonpriority Unsecured Claims			
Colum	nbus, OH 43	3215	Last 4 digits of account number				
Zwick	nd Address er & Assoc Litton Lane	,		☐ Part 1:	Creditors with Priority Unsecured Cla		
	n, KY 4104		•	Part 2:	Creditors with Nonpriority Unsecured	d Claims	
	,		Last 4 digits of account number	93	361		
Dort 4	Add the	Amounta for Each Type of	Uncoured Claim				
Part 4:		Amounts for Each Type of	laims. This information is for statistical	reporting	purposes only, 28 U.S.C. \$159. Ad	dd the amounts for each	
	of unsecured c			. sporting	Par 1 2000 01111 20 010101 31001 A	and amounts for cutil	
					Total Claim		
	ба Гotal	. Domestic support obligation	ons	6a.	\$	<u>)</u>	
cla	aims						
from P			bts you owe the government	6b.	\$ 0.00		
	6c 6d	•	al injury while you were intoxicated insecured claims. Write that amount here.	6c. 6d.	\$ 0.00 \$ 0.00		
	ou	. Guisi Aud all other priority t	mocoured ciamno. Write that amount field.	ou.	φ U.U(j	

Total
claims
from Part 1

6a.	Domestic support obligations	6a.	\$ 0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00

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Debtor 1 Michael K Gay

				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 41,640.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 41,640.00

		Doddino		
Fill in this infor	mation to identify your	case:		
Debtor 1	Michael K Gay			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
					_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			<u>—</u>
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	Nullibei	Street			
	City		State	ZIP Code	_
2.5					
	Name				<u>—</u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
	•				

		Docume	nt Page 32 c	of 54
Fill in this info	rmation to identify your	case:		
Debtor 1	Michael K Gay			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an
				amended filing
Official F	orm 106H			
Schedul	e H: Your Cod	ebtors		12/15
				
ill it out, and n our name and	number the entries in the case number (if known)		the Additional Page to	ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor.
_	,,	,		
■ No				
☐ Yes				
		lived in a community pro Nevada, New Mexico, Pue		y? (Community property states and territories include ington, and Wisconsin.)
No. Go				
☐ Yes. Did	d your spouse, former spou	use, or legal equivalent live	with you at the time?	
in line 2 a	gain as a codebtor only i D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fil
	mn 1: Your codebtor , Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
Name	1			☐ Schedule E/F, line
				☐ Schedule G, line
Numb	per Street			_
City		State	ZIP Code	
3.2				☐ Schedule D, line
Name	1			□ Schedule B, line
				☐ Schedule G, line
Numb	per Street			_

State

City

ZIP Code

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Fill	in this information to identify your c	ase:							
Deb	otor 1 Michael K G	ay			_				
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO		_				
	se number own)		-				ed filing ent showing p		
Of	fficial Form 106l						as of the follo	wing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	Y Y Y Y		12/1
supį spoi attad	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	pouse i e infori	is living w mation ab	vith you, incl oout your spe	ude informat ouse. If more	ion about space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filin	g spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Empl	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed			
	employers.	Occupation	Night Auditor						
	Include part-time, seasonal, or self-employed work.	Employer's name	MCR Property M LLC	anage	ment 4				
	Occupation may include student or homemaker, if it applies.	Employer's address	1503 LBJ Freewa Dallas, TX 75234		e 300				
		How long employed t	here? 4 Years						
Par	t 2: Give Details About Mor	nthly Income				_			
spou If yo	mate monthly income as of the dase unless you are separated. u or your non-filing spouse have meen space, attach a separate sheet to	ore than one employer, co			, ,	·	•	,	J
	,				For	Debtor 1	For Debto non-filing		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,592.29	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	3,592.29	\$	N/A	

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Deb	tor 1	Michael K Gay	-	(Case	number (<i>if knowr</i>) _				
					For	Debtor 1			ebtor 2		
	Cop	by line 4 here	4.		\$	3,592.29	•	\$		N/A	_
5.	List	t all payroll deductions:									
-	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	694.07	7	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5k		\$	0.00	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	С.	\$	0.00)	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00)	\$		N/A	_
	5e.	Insurance	56		\$	166.53	_	\$		N/A	_
	5f.	Domestic support obligations	5f		\$	0.00	_	\$		N/A	_
	5g.	Union dues	50	-	\$_	0.00	_	\$		N/A	_
	5h.	Other deductions. Specify:	_	Դ.+	\$	0.00		·		N/A	-
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	860.60		\$		N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,731.69)	\$		N/A	_
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			•			
	O.L.	monthly net income.	88		\$	0.00	_	\$		N/A	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8k	0.	\$	0.00	<u>) </u>	\$		N/A	-
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	~	\$	0.00	,	\$		N/A	
	8d.		80		\$ -	0.00	_	\$		N/A	_
	8e.	Social Security	86		\$	0.00	_	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$	0.00	_	\$		N/A	_
	8g.	Pension or retirement income	86	_	\$_	0.00		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8r	n.+ 	\$	0.00	_ +	>		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.00)	\$		N/A	4
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4	2,731.69 +	\$		N/A	= \$	2,731.69
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					Ψ_		14/7		2,701100
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep						hedule 11.		0.00
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	2,731.69
12	Do	you expect an increase or decrease within the year after you file this form	2						L	Combi month	ned ly income
10.		No.									

Official Form 106I Schedule I: Your Income page 2

	in Alain in C	tion to intentif				1		
	in this informa	tion to identify yo	our case:					
Deb	tor 1	Michael K G	ay				ck if this is:	
Deb	tor 2						An amended filing A supplement show	wing postpetition chapter
1	ouse, if filing)				-	"	13 expenses as of	
Unite	ed States Bankr	uptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO			MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J				1		
		J: Your	Evnor	1606				12/1
Be a	as complete a ormation. If m nber (if know	and accurate as	possible eded, atta y questio	. If two married people ar ich another sheet to this				or supplying correct
1.	Is this a joir		iloiu					
	■ No. Go to		in a separ	ate household?				
	□и	0		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do vou have	e dependents?	■ No					
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents							☐ Yes
								□ No
								Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do vour ext	enses include		Na				□ res
	expenses o	f people other t d your depende	han $_{oxdotsim}$	No Yes				
Pari Esti		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this f	orm as a si	upplement in a Cha	apter 13 case to report
exp				y is filed. If this is a supp				
the		h assistance an		government assistance it cluded it on Schedule I:)			Your exp	enses
(,,						
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4.	\$	1,081.93
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	·	0.00
				ıpkeep expenses		4c.	·	200.00
5		owner's associat		dominium dues our residence, such as ho	mo oquity loops	4d. 5.	·	0.00
	Accomonal f	nortuaue pavmo	ents for Va	our r esidence , such as no	me equity loans	כ	ת	0.00

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Debtor 1 Michael K Gay	Case number (if known)
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 200.0
6b. Water, sewer, garbage collection	6b. \$ 25.0
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 0.0
6d. Other. Specify: internet	6d. \$ 60.0
cell phone	\$ 137.0
7. Food and housekeeping supplies	7. \$ 375.0
Childcare and children's education costs	8. \$ 0.0 0
Clothing, laundry, and dry cleaning	9. \$ 80.0
Personal care products and services	10. \$ 40.0
Medical and dental expenses	11. \$ 50.0
Transportation. Include gas, maintenance, bus or train fare.	30.0
Do not include car payments.	12. \$ 150.0
B. Entertainment, clubs, recreation, newspapers, magazines, and b	ooks 13. \$ 50.0
Charitable contributions and religious donations	14. \$ 0.0
5. Insurance.	
Do not include insurance deducted from your pay or included in lines	
15a. Life insurance	15a. \$ 12.7
15b. Health insurance	15b. \$ 0.0
15c. Vehicle insurance	15c. \$ 103.0
15d. Other insurance. Specify:	15d. \$ 0.0
5. Taxes. Do not include taxes deducted from your pay or included in list Specify:	nes 4 or 20. 16. \$ 0.0
7. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ 162.0
17b. Car payments for Vehicle 2	17b. \$ 0.0
17c. Other. Specify:	17c. \$ 0.0
17d. Other. Specify:	17d. \$ 0.0
Your payments of alimony, maintenance, and support that you c	
deducted from your pay on line 5, Schedule I, Your Income (Office). Other payments you make to support others who do not live with	
Specify:	h you. \$ 0.0 /
Other real property expenses not included in lines 4 or 5 of this	
20a. Mortgages on other property	20a. \$ 0.0
20b. Real estate taxes	20b. \$ 0.0 0
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.0 0
20e. Homeowner's association or condominium dues	20e. \$ 0.0
. Other: Specify:	21. +\$ 0.00
	ν.σ.
2. Calculate your monthly expenses	
22a. Add lines 4 through 21.	\$ 2,726.70
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Offici	al Form 106J-2 \$
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 2,726.70
3. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule	. 23a. \$ 2,731.6 9
23b. Copy your monthly expenses from line 22c above.	23b\$ 2,726.7
23c. Subtract your monthly expenses from your monthly income.	4.0
The result is your monthly net income.	23c. \$ 4.9
4. Do you expect an increase or decrease in your expenses within For example, do you expect to finish paying for your car loan within the year or modification to the terms of your mortgage? No.	the year after you file this form? do you expect your mortgage payment to increase or decrease because
□ Voc Explain here:	

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Fill in this infor	mation to identify your	case:			
Debtor 1	Michael K Gay				
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRIC	Γ OF OHIO		
0					
Case number (if known)					☐ Check if this is an
, ,					amended filing
If two married p You must file th obtaining mone	y or property by fraud in	, both are equally response. Ie bankruptcy schedule a connection with a ban	onsible for supplying co s or amended schedule	orrect information. es. Making a false state	ment, concealing property, or 0, or imprisonment for up to 20
	is U.S.C. §§ 152, 1341, 1	515, and 5571.			
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules fil	led with this declaration	n and
X /s/ Mic	chael K Gay		X		
	el K Gay		Signature of	of Debtor 2	
	ure of Debtor 1		3		
Date	December 3, 2018		Date		

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Fill in	this inforn	nation to identify your	r case:			
Debtor	r 1	Michael K Gay				
		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States Bai	nkruptcy Court for the:	SOUTHERN DISTRICT (OF OHIO		
		, ,				
(if known	number				_	Check if this is an amended filing
		rm 107 of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/1
nforma	ation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write yo	
Part 1:	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
ı. W	hat is you	current marital statu	ıs?			
	Married Not mar	ried				
2. Du	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
		,				
	l No l Yes Lis	t all of the places you li	ived in the last 3 years. Do n	ot include where you live now	ı	
D		ior Address:	Dates Debtor 1	Debtor 2 Prior Ac		Dates Debtor 2
					ity property state or territor ico, Texas, Washington and V	
		oo molaao / mzona, oa	mornia, radiro, Eddiciana, rec	vada, rrow moxico, r dono re	iso, roxas, rrasilingon and r	viocorionii,
	l No l Yes Ma	ike sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
		,	,			
Part 2	Explai	n the Sources of You	r Income			
Fil	Il in the tota	al amount of income you	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	l No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$38,122.97	☐ Wages, commissions, bonuses, tips	

Official Form 107

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Case number (if known) Debtor 1 Michael K Gay

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		income deductions and ons)	Sources of inco		Gross income (before deductions and exclusions)
	or last calen anuary 1 to	dar year: December 31, 2	2017)	■ Wages, commissions, bonuses, tips		\$36,377.00	☐ Wages, comr bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a b	ousiness	
		dar year before December 31, 2	016 \	■ Wages, commissions, bonuses, tips		\$33,515.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business			☐ Operating a b	ousiness	
5.	Include include and other winnings. I	come regardless oublic benefit pa f you are filing a	of whethe yments; pe joint case ross incom	during this year or the two r that income is taxable. Ex ensions; rental income; inte and you have income that ne from each source separa	camples of erest; divide you receive	other income are a ends; money collec ed together, list it c	ted from lawsuits; r only once under Del	oyalties; and btor 1.	
			:	Debtor 1 Sources of income Describe below.	each s	deductions and	Debtor 2 Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
		1 of current ye iled for bankru	-4·	Pensions and Annuities		\$14,205.65			
	or last calen anuary 1 to	dar year: December 31, 2		Pensions and Annuities		\$4,510.00			
		dar year before December 31, 2	104C \	Pensions and Annuities		\$747.00			
Pa	art 3: List	Certain Payme	nts You N	lade Before You Filed for	Bankrunt	rv			
6.		Debtor 1's or E	Debtor 2's r 1 nor De	debts primarily consume btor 2 has primarily considersonal, family, or househo	er debts? umer debt	s. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		– ~	lays before to line 7.	e you filed for bankruptcy, d	lid you pay	any creditor a tota	l of \$6,425* or more	e?	
		pai not	id that cred t include pa	ch creditor to whom you pa ditor. Do not include paymen ayments to an attorney for t	nts for dom this bankru	nestic support oblig ptcy case.	ations, such as chi	ld support a	nd alimony. Also, do
	_	* Subject to ac	ljustment d	on 4/01/19 and every 3 year	rs after tha	t for cases filed on	or after the date of	adjustment	•
	■ Yes.			both have primarily consum to the you filed for bankruptcy, d			I of \$600 or more?		
		□ No. Go	to line 7.						
		inc	lude paym	ch creditor to whom you pa lents for domestic support c his bankruptcy case.					
	Creditor's	s Name and Ad	dress	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for

paid

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1	Michael K Gay	Document	Page 40 of 54 Case number (if known)	

## Amount you payments to an insider include your relatives; any general partners; relatives of any general partners; partnerships of which you are a officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including or a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No		Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
## Answeria Company Concluded Conc		Attn: Bankruptcy Po Box 982238	October and	\$3,243.00	\$78,261.00	☐ Car ☐ Credit Car ☐ Loan Repa	ayment
Yes. List all payments to an insider. Insider's Name and Address	7.	Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and ar	u are a general ny managing ag	partner; corporations ent, including one for
Still owe Stil		_ `					
Insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address Dates of payment Insider's Name and Address Namount you still amount you still amount payment include redding and not still owe includer of payment include redding and not still owe includer of payment includer and not still owe includer of payment includer of payment includer and not still owe includer of payment includer of payment includer and payment includer of payment includer and payment includer of pa		Insider's Name and Address	Dates of payment		•	Reason for the	nis payment
Insider's Name and Address Dates of payment paid Amount you still owe Stil	8.	insider? Include payments on debts guaranteed or cos No		ments or transfer a	any property on a	ccount of a del	ot that benefited an
Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Case title Case title Court Cou		Yes. List all payments to an insider					
9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No		Insider's Name and Address	Dates of payment				
Case title Case number DISCOVER BANK VS MICHAEL K. GAY 2018-CVF-020096 Bank Of America NA v Michael K Gay 18 CV 006690 Complaint for Money Money Complaint for Court Clerk of Court 3rd Floor 375 South High Street Columbus, OH 43215 Bank Of America NA v Michael K Gay 18 CV 006690 Complaint for Money Franklin County Court of Commom Pleas 345 South High Street Columbus, OH 43215 Pending On appeal On appeal On appeal Concluded On appeal Concluded No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Date Value of prop	9.	List all such matters, including personal injury modifications, and contract disputes.					
DISCOVER BANK VS MICHAEL K. GAY 2018-CVF-020096 Bank Of America NA v Michael K Gay 18 CV 006690 Complaint for Money Clerk of Court 3rd Floor 375 South High Street Columbus, OH 43215 Bank Of America NA v Michael K Gay 18 CV 006690 Complaint for Franklin County Court of Commom Pleas 345 South High Street Columbus, OH 43215 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levier Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Date Value of prop		Case title	Nature of the case	Court or agency		Status of the	case
Gay 18 CV 006690 Money Commom Pleas 345 South High Street Columbus, OH 43215 On appeal Concluded Concluded		DISCOVER BANK VS MICHAEL K. GAY	•	Court Clerk of Court 375 South High	3rd Floor Street	On appea	
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Date Value of prop		Gay	•	Commom Plea 345 South High	s n Street	☐ On appea	
Creditor Name and Address Describe the Property Date Value of prop	10.	Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, f	oreclosed, garnis	hed, attached,	seized, or levied?
			Describe the Property		Date		Value of the
Explain what happened			Explain what happened	1			property

Debtor 1 Michael K Gay Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Value Dates vou more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Date of your Value of property Describe any insurance coverage for the loss how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You JP Amourgis & Associates - Columbus Attorney Fees: \$1200 \$1,616.00 4449 Easton Way Filling Fees: \$335 Suite 200 Credit Report: \$33 Columbus, OH 43219 **CCC/DEC: \$48** bkcolumbus@amourgis.com

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Doc 1

Document

Page 42 of 54 Document Case number (if known) Debtor 1 Michael K Gay 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made Freedom Debt Relief \$342 every 2 weeks. Recevied a refund May 2017-May \$8,000.00 1875 South Grant Street, Suite 400 check in June 2018 \$500 2018 San Mateo, CA 94402 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ☐ No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Wheels for Wishes 2003 Chevrolet Monte Carlo. **Donation July 2018** 20 S 3rd Street #210 Vehicle was in poor Columbus, OH 43215 condition. Worth about \$200 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance instrument closed, sold, Address (Number, Street, City, State and ZIP account number before closing or moved, or transfer transferred XXXX-**American Equity Investment** ☐ Checking May 2018 Unknown PO Box 71216 □ Savings Clive, IA 50325 ☐ Money Market □ Brokerage Other Annuity

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Debtor 1 Michael K Gay

21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ry for securities,
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your home within 1	year before you filed for bankruptcy?	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Inform	•		
For	he purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	nir, land, soil, surface water, ground		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	NoYes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Michael K Gay Michael K Gay Signature of Debtor 2 Signature of Debtor 1 Date December 3, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1 Michael K Gay

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In re	Michael K Gay		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	ISATION OF ATTOR	RNEY FOR DE	CBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(becompensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have received		\$	1,200.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	pers and associates of my	y law firm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspect	s of the bankruptcy c	ase, including:	
1	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, states c. Representation of the debtor at the meeting of creditor d. Representation of the debtor in adversary proceedings e. [Other provisions as needed] 	ment of affairs and plan which rs and confirmation hearing, an	may be required; ad any adjourned hea		tcy;
6.]	By agreement with the debtor(s), the above-disclosed fee	does not include the following	service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debt	or(s) in
D	December 3, 2018	/s/ Brooke Elnora	Elliott		
D	Date (Brooke Elnora Ell Signature of Attorne			
		JP Amourgis & A	ssociates - Colum	ibus	
		4449 Easton Way Suite 200			
		Columbus, OH 43			
		614-934-2000 Fa bk_columbus@aı			
		Name of law firm	u. gioloviii		_

Fill in	this information to identify your case:				only as d	irected in this form and	d in Form
Debto	r 1 Michael K Gay		122	2A-1Supp:			
Debto	ur 2			4 Thansia		tion of above	
	e, if filing)					umption of abuse	
United	d States Bankruptcy Court for the: Southern District of	f Ohio				o determine if a presu nade under <i>Chapter 7</i>	
Case	number					icial Form 122A-2).	Means rest
(if know			.			does not apply now by service but it could a	
				_		<u>'</u>	рріу іацег.
Ott:	sial Farm 100A 1			☐ Check if	inis is a	n amended filing	
	cial Form 122A - 1	4 8.5	41.1				
Cha	apter 7 Statement of Your Cur	rent Mor	ithly inc	ome			12/15
attach : case ni	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to warmber (if known). If you believe that you are exempted froing military service, complete and file Statement of Exempter Calculate Your Current Monthly Income	hich the addition n a presumption	nal information a of abuse becau	ipplies. On the se you do not	top of a	ny additional pages, wri marily consumer debts o	te your name and or because of
1. \	What is your marital and filing status? Check one or	ıly.					
ı	Not married. Fill out Column A, lines 2-11.						
[☐ Married and your spouse is filing with you. Fill ou	it both Columns	A and B, lines	2-11.			
[\square Married and your spouse is NOT filing with you.	You and your s	spouse are:				
	☐ Living in the same household and are not lega	Ily separated.	Fill out both Col	lumns A and I	B, lines 2	2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	egally separated	d under nonban	kruptcy law th	at appli	es or that you and you	
101 the	in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 throusult. Do not include	ugh August 31. de any income a	If the amount m	ount of your monthly incor ore than once. For exam	ne varied during ole, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commission	ons (before all	\$ 3,6	09.84	\$	
	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
f a	All amounts from any source which are regularly part you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	Include regular I, your depende	contributions nts, parents,	\$	0.00	\$	
	Net income from operating a business, profession,	or farm					
			otor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	Camu hara	¢	0.00	Φ	
	Net monthly income from a business, profession, or far	m \$	Copy here ->	Ψ	0.00	\$	
6. I	Net income from rental and other real property	Deb	otor 1				
(Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. I	nterest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Debto	or 1 Michael K Gay			Case numbe	r (if known)			
				Column A Debtor 1		Column L Debtor 2 non-filin		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the a the Social Security Act. Instead, list it here:	mount received was a be	nefit under					
	For you	\$	0.00					
	For your spouse							
	Pension or retirement income. Do not include a benefit under the Social Security Act.	any amount received that	was a	\$	0.00	\$		
10.	Income from all other sources not listed abov Do not include any benefits received under the S received as a victim of a war crime, a crime again domestic terrorism. If necessary, list other source total below.	ocial Security Act or payn nst humanity, or internations son a separate page and	nents nal or	\$	0.00	\$		
	·			\$	0.00	\$ \$		
	Total amounts from separate pages, if a	nv		φs	0.00	φ \$		
	, , ,	•	+	Ψ		Ψ		
11.	Calculate your total current monthly income. each column. Then add the total for Column A to		\$	3,609.84	+ -		= \$	3,609.84
							Total o	current monthly
Part	2: Determine Whether the Means Test App	olies to You						
12	Calculate your current monthly income for the	war Follow those stops						
12.	12a. Copy your total current monthly income from			Con	y line 11	nere->	\$	2 600 84
	12a. Copy your total current monthly income non	Tillie TT		СОР	y iiile i i i	1616->	φ	3,609.84
	Multiply by 12 (the number of months in a ye	ear)					X	12
	12b. The result is your annual income for this par	t of the form				1		43,318.08
13.	Calculate the median family income that appli	es to you. Follow these s	steps:					
	Fill in the state in which you live.	ОН	7					
	in in the state in which you live.	<u> </u>	」 ¬					
	Fill in the number of people in your household.	1						
	Fill in the median family income for your state and						3. \$	48,596.00
	To find a list of applicable median income amoun for this form. This list may also be available at the			in the separ	ate instruc	tions		
	. How do the lines compare?	barmaptoy cicin o cinec	•					
14.	14a. Line 12b is less than or equal to line	12 On the ten of page 1	chack hav	1 Thorois	no procun	antion of ah	USO.	
	Go to Part 3.	13. On the top of page 1	, CHECK DOX	i, mere is	no presun	iption of ab	use.	
	14b. Line 12b is more than line 13. On the Go to Part 3 and fill out Form 122A-2		x 2, The pre	esumption o	f abuse is	determined	by Form 1	22A-2.
Part		2.						
· u··	By signing here, I declare under penalty of p	periury that the information	on this sta	atement and	in any att	achments is	true and c	orrect.
					α, α			
	X /s/ Michael K Gay Michael K Gay Signature of Debtor 1							
	Date December 3, 2018							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or fil	e Form 122A-2.						
	If you checked line 14b, fill out Form 122A-2	and file it with this form.						

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Debtor 1 Michael K Gay Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2018 to 11/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: MCR Property Management 4 LLC

Year-to-Date Income:

Starting Year-to-Date Income: \$16,463.91 from check dated 5/31/2018. Ending Year-to-Date Income: \$38,122.97 from check dated 11/30/2018.

Income for six-month period (Ending-Starting): **\$21,659.06**.

Average Monthly Income: **\$3,609.84**.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Ally Financial PO Box 8133 Cockeysville, MD 21030

Amex Correspondence Po Box 981540 El Paso, TX 79998

Bank Of America Attn: Bankruptcy Po Box 982238 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Central Ohio Endoscopy Center ATTN #9654N PO Box 14000 Belfast, ME 04915

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citibank North America Citibank Corp/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Dell Financial Services LLC Attn: President/CEO Po Box 81577 Austin, TX 78708

Discover Financial Po Box 3025 New Albany, OH 43054

Franklin County Municipal Court Clerk of Court 3rd Floor 375 South High Street Columbus, OH 43215 IRS Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Lloyd & McDaniel PLC Megan Urban, ESQ. PO Box 23200 Louisville, KY 40223-0200

Ohio Attorney General Coll Enforcement Bankruptcy Unit 150 E. Gay Street, 21st Floor Columbus, OH 43215

Ohio Department of Taxation Bankruptcy Division P.O. Box 530 Columbus, OH 43216

Syncb/care Credit PO Box 960061 Orlando, FL 32896

Syncb/clockwrks Royal Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target Attn: Payment Disputes Mailstop 2201, PO Box 26907 Tempe, AZ 85285

Zwicker & Associates, P.C. 2300 Litton Lane Suite 200 Hebron, KY 41048